PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

| Application of | r Docket | Number |
|----------------|----------|--------|
|----------------|----------|--------|

01605042

| (Column 1) (Column 2) | | | | | | SMALL E | | OR | SMALL I | | | | |
|--|------------------------------|-----------------------------------|------------|------------|------|--|------------------|----------|--------------------|------------------------|----------------|---------------------|------------------------|
| FO | OR NUMBER FILED NUMBER EXTRA | | | Г | RATE | FEE | ٠ آ | RATE | FEE | | | | |
| BASIC FEE | | | | | | · | | | 345.00 | OR | | 690.00 | |
| TOTAL CLAIMS Up minus 20= - | | | | . 26 | | | X\$ 9= | | OR | X\$18= | UleB | | |
| INDEPENDENT CLAIMS | | | | | | | | X39= | | OR | X78= | | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | | | +130= | | OR | +260= | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | L | TOTAL | | OR | TOTAL | 158 |
| CLAIMS AS AMENDED - PART II | | | | | | | | SMALL I | ENTITY | OR | OTHER SMALL | | |
| | | (Colum | | | | column 2) | (Column 3) | 1 - | SWALL | |) i | | |
| AMENDMENT A | | CLAIN REMAIN AFTE AMENDI | NING R | | PF | HIGHEST NUMBER REVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| NDM | Total | • | | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| AME | Independent FIRST PRESE | * | | Minus | ENIC | | = | | X39= | | OR | X78= | |
| <u> </u> | FIRST PRESE | MAHON | OF MIC | LIIPLE DEF | CINC | DEINT OLAHVI | | ' | +130= | | OR | +260= | |
| | | | | | | | | | TOTAL DDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| | | (Colum | n 1) | | (C | Column 2) | (Column 3) | 1 | | | | | |
| | | CLAII | | | | HIGHEST | (COLLINIT O) | l r | | ADDI- | 1 | | ADDI- |
| ENT B | | REMAII AFTE AMENDI | NING ER | | PF | NUMBER REVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | TIONAL FEE | | RATE | TIONAL FEE |
| AMENDMENT | Total | • | | Minus | ** | | = | 1 [| X\$ 9= | | OR | X\$18= | |
| AME | Independent FIRST PRESE | + | 05.14 | Minus | *** | | = | | X39= | | OR | X78= | |
| | FIRST PRESE | NIATION | OF MC | LIPLE DEF | ENL | CINT CLAIM | | 」 | +130= | · | OR | +260= | |
| | | | | | | | ٠ | _ A | TOTAL DDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| | · | (Colum | | | | Column 2) | (Column 3) | <u> </u> | | | _ | | |
| ENT C |) | CLAII REMAII AFTE AMENDI | NING ER | | PF | HIGHEST NUMBER REVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| AMENDMENT | Total | * | | Minus | ** | | = | 11 | X\$ 9= | | OR | X\$18= | |
| AME | Independent | * | 05.4 | Minus | *** | |]= | 4 [| X39= | | OR | X78= | |
| <u> </u> | FIRST PRESE | NTATION | OF MU | JUIPLE DEF | ENL | DENT CLAIM | | ┙┠ | +130= | | OR | +260= | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | TOTAL | | | | | |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE THE ADDIT. FEE ADDIT | | | | | | | | | | | | | |